

Student's Program _____

[School Use ONLY Box]

2016-2017 Verification Worksheet (V4)

Identity/Educational Purpose, High School

Completion Status, Child Support Paid & SNAP

(Completed and Signed IN PERSON at the School)

Your 2016–2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, the school may ask you to confirm the information you and your parents reported on your FAFSA. To verify that you provided correct information the financial aid administrator will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the school. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

Student's Information:

Student's Last Name

Student's First Name

Stud. M.I.

Stud. D.O.B.

Student's Soc Sec Number

Valid (not expired) government-issued photo identification presented IN PERSON and copy attached
(School's representative signature required here upon receipt and review):

- ☐ Driver's license or other state-issued photo identification (ID)
- ☐ Military ID
- ☐ Passport
- ☐ Other _____

(Printed name of school's authorized witness)

(Witness signature)

(Date received/reviewed)

Statement of Educational Purpose:

I certify that I, _____, am the individual signing this *Statement of Educational Purpose*
(print student's name)
and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay
the cost of attending _____ for 2016-2017.
(Name of Postsecondary Educational Institution)

(Student's Signature)

(Date)

Student's SSN _____

Student's Name: _____ SSN: _____

High School Completion (mark one):

- ☐ Copy of high school diploma attached.
- ☐ Copy of final official high school transcript with date of graduation attached.
- ☐ Copy of GED certificate or GED transcript (that indicates passing status) attached.
- ☐ Copy of Homeschool state-authorized credential (if required by the state) attached.
- ☐ Copy of Homeschool transcript (if no state credential required) with completed course list and documenting successful completion of secondary school education, signed by parent or guardian, attached.
- ☐ Copy of "secondary school leaving certificate" or similar document for student who completed secondary education in a foreign country attached.

Child Support Paid: Mark and complete the appropriate section regarding 2015 paid child support.

- ☐ **(Dependent Student)** One (or both) of your parents paid child support in 2015. Indicate below the name of the person who paid the child support, the name of the person to whom the child support was paid, the names and ages of the children for whom child support was paid, and the total annual amount of child support that was paid in 2015 for each child. If asked by the school, your parents may need to provide documentation of the payment of child support.
- ☐ **(Independent Student)** You or, if married, your spouse paid child support in 2015. Indicate below the name of the person who paid the child support, the name of the person to whom the child support was paid, the names and ages of the children for whom child support was paid, and the total annual amount of child support that was paid in 2015 for each child. If asked by the school, you may need to provide documentation of the payment of child support.

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name and Age of Child for Whom Support Was Paid	Annual Amount of Child Support Paid in 2015
<i>Marty Jones(example)</i>	<i>Chris Smith (example)</i>	<i>Terry Jones - 8 (example)</i>	<i>\$6,000.00(example)</i>
Total Amount Paid			\$

If you need more space, attach a separate page that includes student's name and Social Security Number at the top.

Receipt of SNAP Benefits: Mark and complete the appropriate section regarding Supplemental Nutrition Assistance Program support in 2014 and/or 2015.

- ☐ **(Dependent Student)** – Your parent(s) certify that _____, a member of their household, as reported on the Free Application for Federal Student Aid (FAFSA), received benefits from the Supplemental Nutrition Assistance Program (SNAP or formerly known as food stamps) sometime during the 2014 or 2015 calendar years. Your parent(s) may be asked to provide documentation from the agency issuing the SNAP benefits in 2014 or 2015.
- ☐ **(Independent Student)** – You, the student, certify that _____, a member of your household, as reported on the Free Application for Federal Student Aid (FAFSA), received benefits from the Supplemental Nutrition Assistance Program (SNAP or formerly known as food stamps) sometime during the 2014 or 2015 calendar years. You may be asked to provide documentation from the agency that issued the SNAP benefits in 2014 or 2015.

Certification and Signatures:

Each person signing this worksheet certifies that all of the information reported on it is complete and correct.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student's Signature

Date

Parent's Signature (of dependent student)

Date